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Rancho Los Amigos Levels of Cognitive Functioning

Level I	No Response: Total Assistance	
_	ence of observable change in behavior when presented visual, auditory, tactile, e, vestibular or painful stimuli.	
Level II	Generalized Response: Total Assistance	
Demonstrates	generalized reflex response to painful stimuli.	
Responds to	repeated auditory stimuli with increased or decreased activity.	
Responds to e purposeful vo	external stimuli with physiological changes generalized, gross body movement and/or not calization.	
Responses no	ted above may be same regardless of type and location of stimulation.	
Responses ma	ay be significantly delayed.	
Level III	Localized Response: Total Assistance	
Demonstrates	s withdrawal or vocalization to painful stimuli.	
Turns toward	or away from auditory stimuli.	
Blinks when	strong light crosses visual field.	
Follows moving object passed within visual field.		
Responds to discomfort by pulling tubes or restraints.		
Responds inconsistently to simple commands		
Responses di	rectly related to type of stimulus.	
May respond	to some persons (especially family and friends) but not to others.	
Level IV	Confused/Agitated: Maximal Assistance	
Alert and in heightened state of activity.		
Purposeful at	tempts to remove restraints or tubes or crawl out of bed.	
May perform	motor activities such as sitting, reaching and walking but without any apparent purpose	

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or upon another's reque

Very brief and usually non-purposeful moments of sustained alternatives and divided attention.

Absent short-term memory.

May cry out or scream out of proportion to stimulus even after its removal.

May exhibit aggressive or flight behavior.

Mood may swing from euphoric to hostile with no apparent relationship to environmental events.

Unable to cooperate with treatment efforts.

Verbalizations are frequently incoherent and/or inappropriate to activity or environment.

Level V

Confused, Inappropriate Non-Agitated: Maximal Assistance

Alert, not agitated but may wander randomly or with a vague intention of going home.

May become agitated in response to external stimulation, and/or lack of environmental structure.

Not oriented to person, place or time.

Frequent brief periods, non-purposeful sustained attention.

Severely impaired recent memory, with confusion of past and present in reaction to ongoing activity.

Absent goal directed, problem solving, self-monitoring behavior.

Often demonstrates inappropriate use of objects without external direction.

May be able to perform previously learned tasks when structured and cues provided.

Unable to learn new information.

Able to respond appropriately to simple commands fairly consistently with external structures and cues.

Responses to simple commands without external structure are random and non-purposeful in relation to command.

Able to converse on a social, automatic level for brief periods of time when provided external structure and cues.

Verbalizations about present events become inappropriate and confabulatory when external structure and cues are not provided.

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Level VI	Confused, Appropriate: Moderate Assistance		
Inconsistently	Inconsistently oriented to person, time and place.		
Able to attend redirection.	I to highly familiar tasks in non-distracting environment for 30 minutes with moderate		
Remote mem	ory has more depth and detail than recent memory.		
Vague recogn	nition of some staff.		
Able to use a	ssistive memory aide with maximum assistance.		
Emerging aw	areness of appropriate response to self, family and basic needs.		
Moderate ass	sist to problem solve barriers to task completion.		
Supervised for	or old learning (e.g. self care).		
Shows carry	over for relearned familiar tasks (e.g. self care).		
Maximum as	sistance for new learning with little or nor carry over.		
Unaware of i	mpairments, disabilities and safety risks.		
Consistently	follows simple directions.		
Verbal expre	ssions are appropriate in highly familiar and structured situations.		
Level VII	Automatic, Appropriate: Minimal Assistance for Daily Living Skills		
Consistently	oriented to person and place, within highly familiar environments.		
Moderate as:	sistance for orientation to time.		
	d to highly familiar tasks in a non-distraction environment for at least 30 minutes with st to complete tasks.		
Minimal sup	ervision for new learning.		
Demonstrate	s carry over of new learning.		
	carries out steps to complete familiar personal and household routine but has shallow the/she has been doing.		
ì	itor accuracy and completeness of each step in routine personal and household ADLs blan with minimal assistance.		
Superficial a	wareness of his/her condition but unaware of specific impairments and disabilities and the		

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limits they place on his/her ability to safely, accurately and completely carry out his/her household, community, work and leisure ADLs.
Minimal supervision for safety in routine home and community activities.
Unrealistic planning for the future.
Unable to think about consequences of a decision or action.
Overestimates abilities.
Unaware of others' needs and feelings.
Oppositional/uncooperative.
Unable to recognize inappropriate social interaction behavior.
Level VIII Purposeful, Appropriate: Stand-By Assistance
Consistently oriented to person, place and time.
Independently attends to and completes familiar tasks for 1 hour in distracting environments.
Able to recall and integrate past and recent events.
Uses assistive memory devices to recall daily schedule, "to do" lists and record critical information for later use with stand-by assistance.
Initiates and carries out steps to complete familiar personal, household, community, work and leisure routines with stand-by assistance and can modify the plan when needed with minimal assistance.
Requires no assistance once new tasks/activities are learned.
Aware of and acknowledges impairments and disabilities when they interfere with task completion but requires stand-by assistance to take appropriate corrective action.
Thinks about consequences of a decision or action with minimal assistance.
Overestimates or underestimates abilities.
Acknowledges others' needs and feelings and responds appropriately with minimal assistance.
Depressed.
Irritable.
Low frustration tolerance/easily angered.
Argumentative.

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Self-centered.

Uncharacteristically dependent/independent.

Able to recognize and acknowledge inappropriate social interaction behavior while it is occurring and takes corrective action with minimal assistance.

Level IX

Purposeful, Appropriate: Stand-By Assistance on Request

Independently shifts back and forth between tasks and completes them accurately for at least two consecutive hours.

Uses assistive memory devices to recall daily schedule, "to do" lists and record critical information for later use with assistance when requested.

Initiates and carries out steps to complete familiar personal, household, work and leisure tasks independently and unfamiliar personal, household, work and leisure tasks with assistance when requested.

Aware of and acknowledges impairments and disabilities when they interfere with task completion and takes appropriate corrective action but requires stand-by assist to anticipate a problem before it occurs and take action to avoid it.

Able to think about consequences of decisions or actions with assistance when requested.

Accurately estimates abilities but requires stand-by assistance to adjust to task demands.

Acknowledges others' needs and feelings and responds appropriately with stand-by assistance.

Depression may continue.

May be easily irritable.

May have low frustration tolerance.

Able to self monitor appropriateness of social interaction with stand-by assistance.

Level X

Purposeful, Appropriate: Modified Independent

Able to handle multiple tasks simultaneously in all environments but may require periodic breaks.

Able to independently procure, create and maintain own assistive memory devices.

Independently initiates and carries out steps to complete familiar and unfamiliar personal, household, community, work and leisure tasks but may require more than usual amount of time and/or compensatory strategies to complete them.

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Anticipates impact of impairments and disabilities on ability to complete daily living tasks and takes action to avoid problems before they occur but may require more than usual amount of time and/or compensatory strategies.

Able to independently think about consequences of decisions or actions but may require more than usual amount of time and/or compensatory strategies to select the appropriate decision or action.

Accurately estimates abilities and independently adjusts to task demands.

Able to recognize the needs and feelings of others and automatically respond in appropriate manner.

Periodic periods of depression may occur.

Irritability and low frustration tolerance when sick, fatigued and/or under emotional stress.

Social interaction behavior is consistently appropriate.

5101:3-3-54.5 Pediatric outlier care in nursing facilities (NF-PED services).

(A) Purpose.

This rule identifies a sub-population of those individuals determined to require a nursing facility (NF) level of care (LOC) for the purpose of providing prior authorized NF-PED services. This rule sets forth:

- (1) In paragraph (C) of this rule, the criteria to determine if an individual with a NF-PED LOC is eligible for outlier services for NF-PED services; and
- (2) In paragraph (D) of this rule, the conditions under which NFs or discrete units within a NF may be approved by the Ohio department of job and family services (ODJFS) as eligible providers of NF-PED services and thereby receive payment established in accordance with rule 5101:3-3-25 of the Administrative Code in lieu of payment established in accordance with rule 5101:3-3-78 of the Administrative Code; and
- (3) In paragraph (E) of this rule, the prior authorization process for admission or continued stay for individuals who are seeking medicaid payment for NF-PED services; and
- (4) In closing paragraphs of this rule, details about the provider agreement addendum, authorization for payment, and materials to be submitted by the provider for setting the initial and subsequent contracted provider per diem rate.

(B) Definitions:

- (1) "Home and community-based services (HCBS)" mean services furnished under the provisions of rule 5101:3-1-06 of the Administrative Code which enable individuals to live in a home setting rather than a NF, an intermediate care facility for the mentally retarded (ICF-MR), or hospital.
- (2) "Individual," for purposes of this rule, means any person who is seeking or receiving medicaid coverage for prior authorized pediatric outlier care in an Ohio medicaid-certified NF which holds an effective "NF-PED services provider agreement" with (ODJFS).
- (3) "Instability of the individual's condition" means that an individual's condition changes frequently and/or rapidly, so that constant monitoring and/or the frequent adjustment of treatment regimens is required. An individual is considered to have an unstable medical condition if one of the following conditions is met:

(a) The physician has ordered that the nurse or therapist monitor and evaluate the individual's condition on an ongoing basis and make any necessary adjustments to the treatment regimen, and the nursing or therapist's progress notes indicate that such interventions or adjustments have been both necessary and made; or

- (b) The physician's orders dealing with the individual's unstable condition reflect that changes and/or adjustments have been made at least monthly.
- (4) "Level of care (LOC) review" is the evaluation of an individual's physical, mental and social/emotional status to determine the LOC required to meet the individual's service needs and includes activities necessary to safeguard against unnecessary utilization. LOC determinations are based upon the criteria regarding the amount and type of services needed by an individual that are set forth in rules contained in Chapter 5101:3-3 of the Administrative Code. The LOC process is also the mechanism by which medicaid vendor payment is initiated.
- (5) "Nursing facility (NF)" means any long term care facility (excluding ICFs-MR) currently certified by the Ohio department of health as being in compliance with the NF standards and medicaid conditions of participation.
- (6) "ODJFS designated outlier coordinator" means a designated ODJFS staff member who coordinates the general operation of the long term care facility outlier program. This coordinator's duties include, but are not limited to the following:
 - (a) Assisting with the initial approval and ongoing monitoring of outlier provider facilities; and
 - (b) Coordinating the processing of preadmission and continued stay prior authorization requests for individuals; and
 - (c) Representing ODJFS as a team member on the individual's interdisciplinary team; and
 - (d) Review assessments, individual plans (IPs), day programming plans, staffing plans, and other documents; and
 - (e) Work actively with providers of outlier services, the individuals and their



representatives requesting and receiving outlier services, other service agencies, and within ODJFS.

- (7) "Outlier prior authorization committee" means a committee organized and operated by ODJFS that makes outlier prior authorization determinations.
- (8) "Preadmission screening" (PAS) refers to that part of the preadmission screening and annual resident review (PASARR) process, which must be met prior to any new admission to a NF and completed in accordance with rule 5101:3-3-15.1 of the Administrative Code.
- (9) "Physician" means a doctor of medicine or osteopathy who is licensed to practice medicine.
- (10) "Primary diagnosis" has the same meaning as in rule 5101:3-3-15.1 of the Administrative Code.
- (11) "Representative" means a person acting on behalf of an individual who is applying for or receiving medical assistance. A representative may be a family member, attorney, hospital social worker, NF social worker, or any other person chosen to act on the individual's behalf.
- (C) Eligibility criteria for individuals.

To receive prior authorization approval for NF-PED services, the individual must meet all the following criteria.

(1) Financial eligibility.

The individual must have been determined by the county department of job and family services (CDJFS) to meet the medicaid financial eligibility standards for institutional care; and

(2) PAS determination.

The individual must have received one of the following determinations in accordance with rule 5101:3-3-15.1 of the Administrative Code:

(a) That the individual does not have indications of either serious mental illness, or mental retardation or other developmental disabilities and was not subject to further PAS review; or, if the individual was subject to further review,

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(b) That the individual needs the level of services provided by a NF; and

(3) NF level of care.

The individual must be determined to need a NF level of care; and

(4) Age requirement.

The individual must be under twenty-two years of age; and

(5) Medical condition.

The individual must be either an inpatient in an acute care hospital at the time of application, or at risk of being hospitalized if not placed in a NF-PED unit, for the treatment of an unstable (as defined in paragraph (B)(3) of this rule) or life-threatening, medically complex condition, and have needs that cannot be met by available services in a noninstitutional setting; and

(6) Physician services.

The individual must require physician services at least weekly; and

(7) Nursing services.

The individual must require the extensive monitoring, professional assessment and skilled intervention of a registered nurse (RN) on a twenty-four-hour a day basis.

(D) Provider eligibility.

In order to obtain a "NF-PED services provider agreement" and qualify for enhanced payment for the provision of NF-PED services, the provider must meet all of the following requirements:

(1) Certified NF and consent to ODJFS oversight.

The provider must be an Ohio medicaid-certified NF and agree to cooperate with the ODJFS oversight function for provision of NF-PED services; and

(2) Long-term care provider agreement.

The provider must meet the requirements for a "Long-Term Care Provider

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